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URBAN DISTRICT COUNCIL OF
BEACONSFIELD

ANNUAL REPORT

of the
Medical Officer of Health

For the Year 1954

T. P. EVANS, M.R.C.S., L.R.C.P., D.P.H.,
MEDICAL OFFICER OF HEALTH

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*Public Health Department,
Council Offices,
Beaconsfield.
May, 1955.*

*To the Chairman and Members of the Beaconsfield Urban District
Council.*

DEAR MR. CHAIRMAN AND MEMBERS,

I have the honour to present my Annual Report on the Health and Sanitary circumstances of the Council's district for the year 1954.

During the year the health of the community was good. The usual standards for judging the well-being of a community are the prevalence and death rates from certain conditions, such as the infantile mortality rate, the maternal mortality rate, the rate of notification of new cases of tuberculosis and the tuberculosis death rate. All these were low in 1954. So also were the number of notifications of all the commoner acute infectious diseases. There was no epidemic of any kind. Nor was there a case of diphtheria notified during the year, thus making 1954 the eighth successive year during which no case of diphtheria was notified within the Council's district. These satisfactory indices of public health indicate a decline in the conditions associated with overcrowding.

There is evidence to support the view that the year 1954 marked the end of the aftermath phase of the recent war. The changing patterns of future trends also became evident. For instance, when meat was decontrolled on the 2nd July 1954, the provision of adequate local slaughtering facilities became a matter for the local Council. This, however, is temporary and dependent upon the future implementation of the national policy of moderate concentration of slaughtering facilities. Another instance is that the Housing Repairs and Rents Act 1954 attempts a solution of an aspect of the Housing problem that is different from that successfully accomplished by new housing construction. It authorizes and encourages, by monetary grants, the modernization of the older houses so many of which are over 65 years old. As most Housing Authorities already have, or soon will have, reached the peak period of new housing construction, it is to be expected that greater use of improvement grants for conversions and modernization will be made in the future. And finally under the Housing Repairs and Rents Act 1954 slum clearance which has been in abeyance since

the late thirties has been revived. The Council is under an obligation to submit in outline within twelve months of the 30th August 1954, its programme of slum clearance for the next five year period. When prominence is given to slum clearance as at present, it may be safely assumed that the overcrowding index is so low as to indicate that the need for new-house building has been satisfied sufficiently. If further evidence of changing patterns were necessary, reference should be made to the field trials of the Salk vaccine against poliomyelitis in the U.S.A. during the early summer months of 1954.

The Registrar General's County Report No. 16 is the 1951 Census Report relating to Buckinghamshire. It contains not only interesting information about the County as a whole, but also useful statistical information about Local Government areas within the County. One impressive fact about the County is that its increase in population of 42 per cent in the last two decades (1931-51) is exceeded by only two other Counties in England and Wales. Such local matters as the increase of local population and its distribution and concentration in the fringe areas of Greater London are matters of interest to this Council.

In conclusion, I wish to express my appreciation of the willing co-operation of the other Chief Officers of the Council, and more particularly Mr. Crosby, the Council's Engineer and Chief Sanitary Inspector.

I am,

Your obedient Servant,

T. P. EVANS,
Medical Officer of Health.

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Births and Deaths ; Mortality Rates, 1954.

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Prevalence and Control over Infectious Diseases.

Incidence of Notifiable Diseases.

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New Cases and Mortality Rates, 1953.

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Section 50 : Burials.

Section VII. Housing

New Houses constructed post-war period.

Housing Repairs and Rents Act 1954.

Section VIII. Sewerage and Sewage Disposal

Sewerage ; Sewage Disposal ; Drainage.

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Section IX. Sanitary Services

Water Supply ; Refuse Disposal and Salvage.

Salvage Returns : Abatement of Nuisance.

Verminous Premises ; Inspections ; Pet Animals Act.

Rodent Control ; Inspection and Supervision of Food.

Specified Area ; Sampling.

Section X. Factories Act

Section XI. Miscellaneous

Appendices ; Analysis of Water Samples.

STAFF

T. P. Evans, M.R.C.S., L.R.C.P., D.P.H.
John H. Crosby, F.I.A.S., F.I.S.E., M.R.S.I.

SECTION I

GENERAL AND VITAL STATISTICS

Statistics and Social Conditions of the Area

Area (acres) of District	...	...	...	...	5,310
Number of inhabitable Houses (per Rate Book)	...				2,520
Rateable Value of Area	...	...	...	...	£95,878
Sum represented by 1d. Rate ('55/56)	...	...	...	...	£390

Population

The Registrar General's population figure for 1954 was	8,290
Population per square mile	990

Beaconsfield is situated about 25 miles west of London. It has its "old-town" whose red brick houses flank its broad High Street, and about three-quarters of a mile to the North East, is the "new-town," built around the more recent Railway Station.

Beaconsfield stands at the foot of one of the South-easterly spurs of the Chiltern Hills : its subsoil is mainly gravel.

Its proximity to London brings Beaconsfield increasingly within the influence of the metropolis. Both "the old" and "the new" towns are increasingly becoming London dormitory areas, and there is little reason to believe that this tendency will halt within the foreseeable future.

The "new town" has been very fortunate in its early planning in that its density of population is low, and it has attracted a large high-class population. Light industries have, however, infiltrated here and there, but they have been gentle in their intrusion.

BIRTHS, INFANT AND MATERNAL MORTALITY

Births

Birth rate per 1,000 population 15.4

(a) <i>Live Births</i>					<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate	...	...	...	...	65	62	127
Illegitimate	...	...	...	...	1	0	1

(b) <i>Still Births</i>					<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate	—	1	1
Illegitimate	—	—	—
Still Birth Rate per 1,000 births	...	—	—	...	—	—	.78

(c) *Deaths from Puerperal Causes* Nil

(d) <i>Deaths of Infants under one year of age</i>					...	...	3
					<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate	...	...	...	...	—	2	2
Illegitimate	...	...	...	...	1	—	1

(e) <i>Deaths of Infants under 4 weeks of age</i>					2
					<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate	—	2	2
Illegitimate	—	—	—
Infant Mortality : All Infants per 1,000 live births							23.4
Neo-Natal Mortality : per 1,000 births					15.6

Deaths

Death Rate per 1,000 population 9.3

DEATHS

Disease					Males	Females	Total
1.	Tuberculosis	...	...	...	—	—	—
2.	Cancer	...	...	...	10	6	16
	(a) Lung : Bronchus	(2M. 2 F.)					
	(b) Other : Glands, etc.	(8M. 2F.)					
	(c) Stomach	(1M.)					
	(d) Breast	(1F.)					
3.	Circulatory	...	...	...	3	9	12
	(a) Intracranial lesions	(2M. 7F.)					
	(b) Others	(1M. 2F.)					
4.	Heart	...	...	...	16	18	34
	(a) Coronary, Angina, etc.	(10M. 9F.)					
	(b) Hypertension	(1M. 3F.)					
	(c) Others	(5M. 6F.)					
5.	Diabetes	...	...	...	—	1	1
6.	Ulcer of Stomach and Duodenum	...			1	—	1
7.	Nephritis	...	...	...	1	—	1
8.	Bronchitis	...	...	...	1	—	1
9.	Pneumonia	...	...	...	—	2	2
10.	Other ill-defined diseases	...	...		5	2	7
11.	Motor Vehicles	...	...	...	1	—	1
12.	Congenital Malformations	...	...		1	—	1
					—	—	—
					39	38	77
					—	—	—

COUNTY OF BUCKINGHAM (Urban Districts only)

Populations, Births and Mortality Rates for the Year 1954.

District	Population Census, 1951	Registrar General estimated Population Mid-1954	Crude Birth Rate per 1,000 Population	Crude Death Rate per 1,000 Population	Tuberculo- sis Death Rate per 1,000 Population	Infant Mortality Rate per 1,000 Births	Neo-Natal Mortality Rate per 1,000 Births	Maternal Mortality per 1,000 live and still births
URBAN								
Aylesbury ...	21,054	21,200	16.7(355)	9.6(203)	0.14(3)	16.9(6)	16.9(6)	—(—)
Beaconsfield ...	7,909	8,290	15.4(128)	9.3 (77)	—(—)	23.4(3)	15.6(2)	—(—)
Bletchley ...	10,916	12,290	16.9(208)	7.6 (94)	—(—)	9.6(2)	9.6(2)	—(—)
Buckingham ...	3,944	4,090	17.8 (73)	12.5 (51)	—(—)	27.4(2)	27.4(2)	—(—)
Chesham ...	11,428	11,550	15.2(176)	10.3(119)	0.09(1)	11.4(2)	5.7(1)	—(—)
Eton ...	3,250	4,780	10.3 (49)	6.3 (30)	—(—)	20.4(1)	20.4(1)	—(—)
High Wycombe ...	40,692	42,230	16.0(675)	8.6(364)	0.14(6)	17.8(12)	16.3(11)	—(—)
Linslade ...	3,269	3,400	18.5 (63)	7.9 (27)	0.29(1)	15.9(1)	15.9(1)	—(—)
Marlow ...	6,480	6,640	15.7(104)	11.3 (75)	0.15(1)	19.2(2)	9.6(1)	—(—)
Newport Pagnell ...	4,366	4,290	13.8 (59)	12.1 (52)	—(—)	33.9(2)	33.9(2)	—(—)
Slough ...	66,439	67,090	14.5(975)	7.6(510)	0.13(9)	20.5(20)	10.3(10)	—(—)
Wolverton ...	13,421	13,550	13.6(184)	15.4(209)	0.15(2)	27.2(5)	10.9(2)	5.41(1)
TOTAL ...	193,168	199,400	15.3(3049)	9.1(1811)	0.12(23)	19.0(58)	13.4(41)	0.32(1)

NOTES:—1. In view of the small numbers on which some of the rates quoted are based, the actual numbers are given in parenthesis for the purpose of clearer comparison.

2. The maternal death in Aylesbury Rural District relates to a death where the interval between the maternal condition and date of death was stated to exceed twelve months.

SECTION II

INFECTIOUS DISEASES

As will be seen from the following table, the incidence of the Notifiable Infectious Diseases during the year was low. Reference to the graph illustrating the biennial characteristic of epidemic measles shows that during 1954 a new *low* record of cases (3) was notified, which may be compared with the highest-ever record number of 260 notified in the previous year, 1953. The remaining notifications are, once again, so low as to call for no special mention or observation. The only possible exception is the continuing absence of Diphtheria certifications.

Incidence of Notifiable Infectious Diseases — 1954

Measles	...	...	...	...	3 cases
Scarlet Fever	...	...	...	...	14 „
Whooping Cough	...	...	...	...	14 „
Meningococcal Infection	...	...	...	...	2 „
Dysentery	...	...	...	...	1 „
Pneumonia	...	...	...	...	Nil „
Poliomyelitis	...	...	...	...	Nil „
Diphtheria	...	...	...	...	Nil „

Food Poisoning (Paratyphoid)

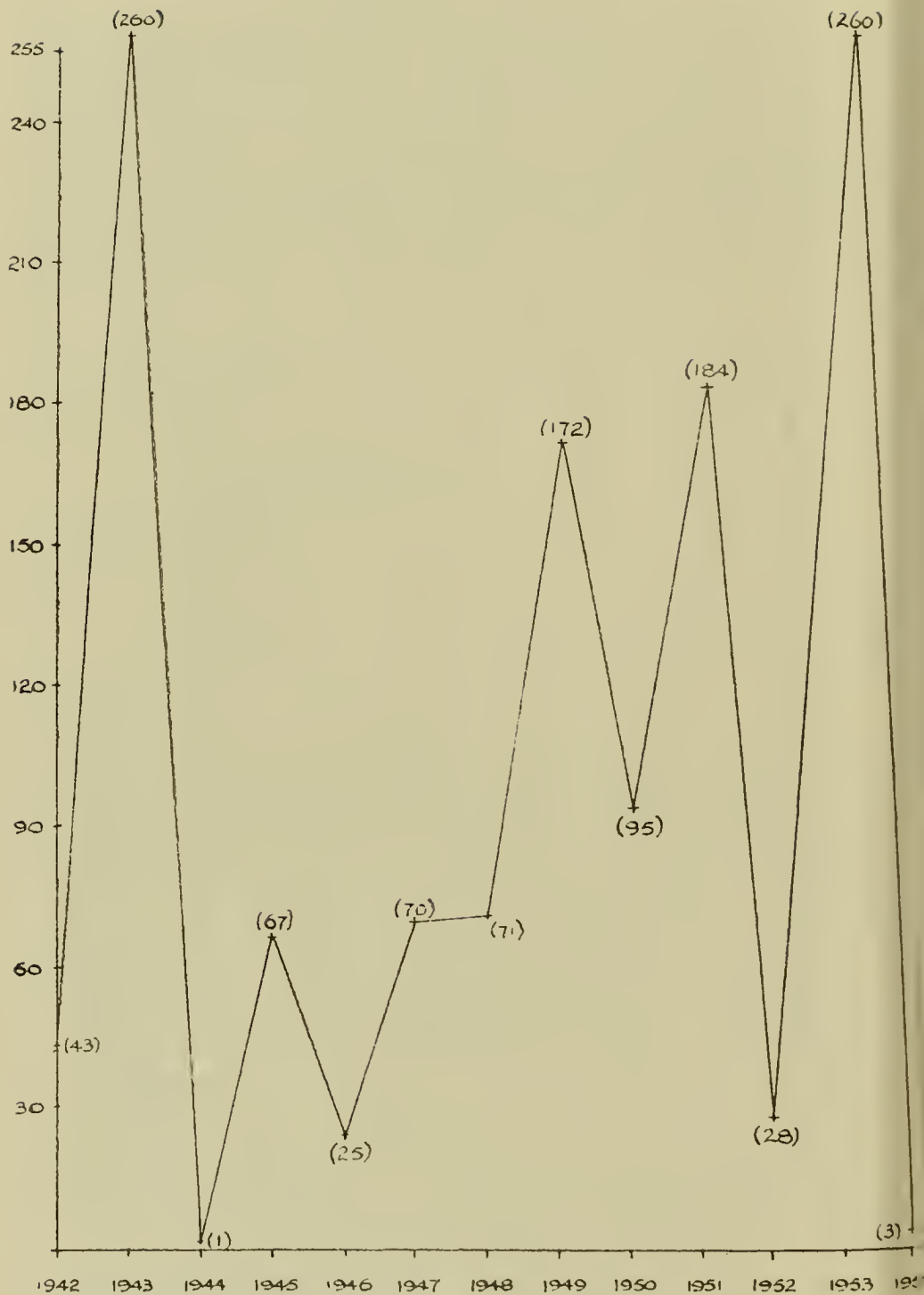
In December a case of paratyphoid fever in a schoolboy was notified by a hospital to the appropriate Sanitary Authority, but as the boy's home address was in Beaconsfield the notification was transferred here so that inquiries might be made. On investigation it was found that the boy's mother, on his school's half-term holiday, took him to spend the day at one of the neighbouring towns. All three members of the party—the boy's mother, his aunt and the boy himself ate similar meals out during the day. The mother bought, in addition, some cream buns to be consumed at home, and they were all consumed by the boy. Within a short time he became very ill with abdominal pains; was admitted to hospital where a diagnosis of Paratyphoid Fever was established. Further inquiries showed that at the town referred to above, there had been a short sharp limited outbreak of dysentery in the town during the material times. Laboratory investigation proved that the causative organism of the isolated Beaconsfield case and the group of cases elsewhere was identical. The source was traced to the contamination of bakery machinery with old stock of infected foreign egg powder, the importation of which had been suspended some time previously.

MEASLES.

	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Numbers notified ...	40	30	32	39	96	76	52	43	87	97	14	14	141	119
Under 1 year ...	1	—	—	—	6	3	—	1	3	4	—	—	2	1
1-2 years ...	11	9	4	7	18	10	10	5	9	10	8	6	17	25
3-5 years ...	15	9	17	22	37	31	27	19	48	40	2	6	37	34
6-9 years ...	10	7	11	7	27	16	15	12	22	24	4	1	79	52
10-14 years ...	3	3	—	2	6	6	—	1	2	7	—	—	2	2
15-24 years ...	1	1	—	1	—	6	—	3	2	4	—	—	3	1
25 years and over ...	—	1	—	—	2	4	—	2	1	8	—	1	1	4
TOTAL (All ages) ...	40	30	32	39	96	76	52	43	87	97	14	14	141	119
TOTAL NOTIFICATIONS	70		71		172		95		184		28		260	
YEAR ...	1947		1948		1949		1950		1951		1952		1953	1954

MEASLES

Alternate Year Epidemic Nature



DIPHTHERIA AND WHOOPING COUGH

<i>Age Group</i>	<i>Under</i>							<i>Total</i>
	1	1	2	3	4	5-9	10-14	
Primary Immunization	58	45	4	—	—	1	1	109
Re-Immunisation	—	—	—	3	4	59	6	72

The year 1954 was the eighth successive year during which no case of Diphtheria was notified within the Council's district. The number of cases in the country as a whole fell to the new low record number of 182. Thus it may be inferred that Diphtheria is a dying disease. Indeed there may be some justification for the view that we are devoting too much time to a disease which kills no more persons than do thunderbolts. The answer to this criticism is however obvious; if we cease immunizing children against diphtheria, the disease will return in its former severity, and the number of cases as well as the death rate will mount rapidly. This danger is by no means theoretical. The average young mother has now never seen a case of diphtheria, nor does she know of any friend in the neighbourhood whose child has suffered from such an attack. It is natural therefore that she should be increasingly apathetic in the matter of obtaining protection for her child.

Fortunately or unfortunately, Whooping Cough is sufficiently prevalent to make parents anxious to avoid it as far as it is humanly possible, and the dramatic success of Diphtheria immunization has led to an urgent demand for preventive immunization against other infectious diseases, including Whooping Cough. And here it is only fair to say that today Whooping Cough is one of the major infectious diseases as well as being one of the most distressing hazards of infant life. Hence it is not surprising that authorised research field-trials are taking place to determine the efficacy of several immunizing agents against Whooping Cough. It is therefore common practice nowadays to protect a child against Diphtheria and Whooping Cough at the same time by three single injections of balanced doses of combined preventives

Each disease presents its own problem. In regard to Diphtheria it is public apathy now there are so few cases. If the number of cases is to be kept down, at least 75 per cent of children under one year of age must be immunized, yet during 1954 the proportion in Beaconsfield was 50.87 per cent, whilst the national proportion was 35.75 per cent only. With regard to Whooping Cough the problem is how to encourage immunization early enough in infancy; for the most critical period is the first six months of life, and the disease is more deadly in the first six months than in the second. The present recommendations are that vaccination against small-pox as well as preventive inoculations against both Diphtheria and Whooping Cough should be completed within the first six months of life.

Immunization is now practised against at least fourteen infectious diseases, and there is hope of protection against more of the virus diseases. Smallpox vaccination of infants is well established; immunization against Tuberculosis with B.C.G. is now being practised, whilst travellers abroad are well acquainted with yellow fever vaccination. The early administration of balanced doses of combined preventive against Diphtheria and Whooping Cough has much to commend it.

POLIOMYELITIS

Having in my Annual Reports for 1952 and 1953 anticipated and reported that "a live attenuated and harmless vaccine for immunization against poliomyelitis will be available in the next few years," recent events in the U.S.A. compel me to return to the subject again this year. In the U.S.A. a vaccine for this purpose, discovered by Dr. Jonas Salk of Pittsburgh University, was given a field trial on an unprecedented scale in the spring of 1954. The results of such trials were assessed under the expert guidance of Dr. Thomas Francis Jr., of the University of Michigan, and were released by the National Foundation for Infantile Paralysis to coincide with the tenth anniversary, in April 1955, of the death of President Roosevelt, and have been acclaimed as an outstanding achievement. Indeed, seldom has an item of scientific news aroused such intense and universal interest as the announcement of these successful field trials.

In the trials 440,000 school children in forty-four states were vaccinated; about half as many were injected with uninfected fluid, and a further 1,830,000 served as additional controls. Dr. Francis is reported to have said that the vaccine had proved to be 80-90% effective in preventing paralytic poliomyelitis. This is unquestionably a tremendous achievement and will, no doubt, become a landmark in preventive medicine. But at the same time it would be unfortunate if, in the first burst of enthusiasm, it was thought to be the final answer to poliomyelitis.

Several batches of vaccine had to be used in the study and in some areas several lots were used in combination. But the potency of different batches of vaccine, when injected, to stimulate the production of resistance in the body to poliomyelitis, differed widely. Lots were graded as "good," "moderate," "low moderate" or "poor" in such potency by a combination of laboratory control and a knowledge of the infecting strain of virus.

Special attention was paid to reactions to vaccination, and no localization of paralysis to the limb of inoculation (as is sometimes found with other injections) was found in children who developed paralysis within one month of vaccination. The preliminary report seems to have established clearly that the vaccine prepared by Dr Salk was safe and protected against poliomyelitis.

At this stage interest in this country became intense and so urgent that on the 25th April the Minister of Health made a statement in the House of Commons congratulating Dr. Salk on what is clearly a momentous and historic advance in the protection of human well-being. He also announced that we in this country will go ahead with the increased production of vaccine; that two important firms were already arranging to do this as fast as possible, and that it is the Government's intention to ask these firms to sell to the Government their whole output. Adding that it was perhaps as well to put the facts in plain words, he said that the new vaccine involves inoculating our children at repeated intervals with a preparation derived from the kidneys of dead monkeys; that we must make sure that it is effective against the particular strain of virus most commonly found in this country; that it is not sure yet that it is fully effective in the case of children about four or under where our incidence of the disease is highest; and that it may be less than normally effective against TYPE I of the virus — the commonest type in this country. These reservations keep the picture in true perspective. But they do not detract from the intense humanitarian value of this great discovery or affect the determination that the people of this country shall benefit from it to the fullest possible extent.

Later, on the 2nd May, the Minister was asked to make a further statement about poliomyelitis vaccine in view of the decision taken in the U.S.A. to suspend all injections of Salk vaccine made by the Cutter Laboratories (U.S.A.) and also what information the Minister had received in respect of deleterious effects arising from the use of the recently discovered vaccine. The reply was to the effect that all vaccine proposed to be used in a small field trial in this country will first have to be the subject of rigorous tests by the Medical Research Council: that plans for large-scale immunization are dependent on the Minister of Health being satisfied as far as is humanly possible as a result of those tests and trials, and that the vaccine to be used is both efficient and free from danger.

It was announced in Washington on Friday the 6th May, 1955, that supplies of the newly manufactured Salk anti-polio vaccine had been "held up"; that safety measures are being considered under which every batch and not just sample lots will be tested. The U.S. Public Health Service, it is reported, has confirmed that at the time of writing, 44 children have developed poliomyelitis but that 4,000,000 to 6,000,000 people have had "shots." The National Foundation for Infantile Paralysis has announced that most of the first and second-grade school children (age 6-7) in the country (U.S.A.) will have been vaccinated before the summer vacation this year.

The unusual insertion of dates in a report of this nature indicates the urgency and intensity of world-wide interest in this matter. In conclusion it may be said that from the preliminary reports of the 1954 U.S.A. trials, it appears that the vaccine used was safe, and

there is no cause to alter that opinion, but it is by no means clear that the same safety tests apply to-day. Unquestionably the most important requirement in a vaccine is its safety and the tests to ensure this must be strict indeed.

Finally it may be said that findings in Canada and Finland support the U.S.A. results that the vaccine is 80-90% effective in preventing paralytic poliomyelitis in immunized children. Is it too much to hope that immunization of the entire susceptible population may help to eliminate paralytic poliomyelitis in the same manner that small-pox has been controlled by mass vaccination.

SECTION III

HEALTH SERVICES IN THE AREA

1. Hospital Services

There is no general hospital in Beaconsfield, but it has three Nursing Homes registered by the Bucks County Council. St. Joseph's Nursing Home, Candlemas Lane was excluded from the operation of the National Health Services Act, 1946, by the direction of the Minister of Health.

Beaconsfield is just within the area of the North-West Metropolitan Regional Hospital Board. It might almost be described as a fringe area—it is the most northerly of the four Bucks Local Authority areas, namely Eton Urban, Eton Rural and Slough Borough—to be included in this Region. Its boundaries flank those of the adjoining Oxford Regional Hospital Board, and Beaconsfield, in the matter of Hospital services, looks towards High Wycombe in the Oxford Regional Hospital Area and not to Slough or Windsor situated in the North West Metropolitan Hospital Region.

2. Laboratory Services

The Public Health Laboratory Service is concerned with Bacteriology and Epidemiology in relation to the diagnosis, prevention and control of Infectious Disease.

The Regional Public Health Laboratory is situate at Walton Street, Oxford, and, in general, undertakes, free of charge, the bacteriological examination of such specimens as sputum, nose and throat swabs, faeces, urine, blood, etc.

The chemical examination of water and sewage effluent is undertaken by the Public Analyst, Southwark Borough Council.

Because it is more readily accessible, a good deal of use is also made of the Public Health Laboratory Service at Luton, under Colonel Walker. The Bacteriological examination of water and ice-cream samples is usually carried out at this laboratory.

3. Nursing in the Home

The following Nurse Midwives practised in the town during the year 1954 :

Miss G. Urquhart, S.R.N., S.C.M., Q.N.

Miss O. Rayner, S.R.N., S.C.M., Q.N.

Their address is : Nurses Homes, Candlemas Mead, Beaconsfield. Tel.: Beaconsfield 954.

These Nurses hold the Health Visitors Certificates of the Royal Sanitary Institute.

In addition to attending cases in their homes, the nurses give their services to the monthly Welfare Clinics held at the Old Rectory.

4. Welfare Clinics

Child Welfare Clinics to which mothers can be referred direct, are provided throughout the County. The Beaconsfield Child Welfare Clinic is held at the Old Rectory, where there are two sessions per month, viz. on the 1st and 3rd Friday of each month. On the former of these, a Medical Officer is in attendance when immunization against diphtheria is undertaken. Parents may have their children immunized by their own private doctors, who can be supplied free with the prophylactic on application to the Council Offices.

5. Ambulance Services

This service, provided by the County Council under the National Health Service Act 1948, is for the conveyance of persons who, for medical reasons, are unable to travel by public transport.

The County Transport and Ambulance Service has been re-organized, and the Headquarters are now at 5, Buckingham Road, Aylesbury (Telephone : Aylesbury 375). In addition to Headquarters, six main stations have been established to cover the whole of the County to which application for transport should be made. The nearest main station to Beaconsfield is at High Wycombe, address : Queen Victoria Road, High Wycombe (Telephone No.: 2310).

Any ambulance station can make arrangements for stretcher or sitting car cases to travel by rail. Since this provides the most comfortable and economical way of sending the majority of patients long distances, it is used wherever possible.

SECTION IV

NOTIFICATIONS OF TUBERCULOSIS, 1954

During 1954 there were four entries in the Tuberculosis Register of which three were new cases, and the fourth was a re-notification. There were neither transfers of notified Tuberculosis cases *into* the Council's district, nor *out* of it. The four entries were cases of Tuberculosis of the lungs, and may briefly be described as follows: Case I, Male, aged 28, occupation grocer : Case II, Female, aged 28, occupation cook : Case III, Female, aged 30, was a re-notified case, having been originally notified in 1947 : Case IV, Male, aged 42, officer in the Regular Army. All cases received appropriate treatment either at hospital or sanatorium. It may be worth noting that during 1954 for the first time there have been no notifications of non-pulmonary Tuberculosis, that is, Tuberculosis of glands of neck, of bones and joints or of the meninges. And it may possibly be worth noting, though it is too early to make a final decision yet, that there are two contributing causes which conspire as it were, to bring this about. Remembering that the group most susceptible to this type of tuberculosis are children, and that this type of the disease is derived, in the main, from milk infected with tuberculosis, it may be significant that this type of tuberculosis is disappearing at a time when more milk than ever before is provided free for school children in schools. One of the reasons for this freedom from this type of disease is no doubt the care taken to ensure that only milk that is safe is provided for consumption in schools. And the second cause without doubt, is the effect of the Minister of Food's inclusion of Beaconsfield in an Order declaring it to be "a specified area" under the relevant Milk and Dairies Regulations. Since that Order became operative in 1953 its effect has been to render the sale of raw milk for human consumption illegal, and the retailing for this purpose of specially designated milk is made obligatory within the Council's district.

SECTION V

MILK

Milk and Dairies Regulations, 1949—Section 20

When a Medical Officer of Health is satisfied that any person is *suffering* from disease caused by the consumption of milk, or if he has reasonable grounds for *suspecting* that a person is so suffering, or indeed that the milk is *infected* with an organism capable of causing disease in man, he may serve a notice prohibiting the sale of such milk unless it has been treated in such a way as to secure to his satisfaction that it may, with safety, be sold for human consumption. A dairy farmer on whom such notice is served, is entitled to compensation for damage or loss by reason of the notice served.

The commonest organisms giving rise to infected milk are the organisms of brucella, which give rise to "slipped calf" or abortion in cattle, and are capable of giving rise to disease in man. Happily no samples of milk infected with these organisms were reported to me during 1954. Another not uncommon cause of infected milk are the organisms of Tuberculosis: these give rise usually to non-pulmonary tuberculosis, that is, commonly in children, to tuberculosis of the glands of neck, or bones and joints and sometimes of the meninges. The presence of these organisms in milk was reported on two occasions, once in January and again in September 1954. However, as the Council's district had become a "specified area" under the relevant regulations whereby it was illegal to sell such milk raw in this district, the question of serving a notice and the consequent entitlement to damages did not arise. Further, arrangements were made to secure that all milk from these herds was rendered safe prior to sale for human consumption elsewhere.

Tuberculosis Order, 1938

An investigation of the individual members of the dairy reported above resulted in the removal and slaughter of 8 cows under the terms of this Order

Food and Drugs Act, 1950—Section 23

Under the authority of Statutory Instrument 1953, No. 1660, which became effective on the 2nd December, 1953, the Urban District of Beaconsfield became a "specified area." One of the main purposes of this Section was no doubt to prevent the spread of bovine tuberculosis through infected milk. Since then the Minister has made a further Order specifying the whole of the remainder of the County of Bucks. When this further Order became operative on the 21st March, 1955, it was estimated that 68% of the population of England and Wales would be living within "specified areas."

SECTION VI

NATIONAL ASSISTANCE ACTS, 1948 — 1951

The duties imposed by two sections of these Acts, viz Section 47 and Section 50, are the responsibilities of the local District Councils. The provisions of the former have for their purpose the securing of the necessary care and attention for those who are suffering from chronic disease, or being aged, infirm are living in insanitary conditions and are unable to devote to themselves, and are not receiving from others, proper care and attention. Under the latter section, the duty is placed upon local Councils to arrange for the burial or cremation of any person who has died or been found dead in their area when no other arrangements are being made for the burial. The Council has not been called upon to fulfil its responsibilities under either of these sections during the year.

SECTION VII

HOUSING

Housing accommodation provided by the Council and occupied on the 31st March, 1955, was as follows : —

A. Number of Pre-war Dwellings	...	...	224
B. Number of Temporary Dwellings	...	...	40
C. Number of Post-war Dwellings (other than B)			361
			<hr/>
			625

The Housing Repairs and Rents Act, 1954

The Housing Repairs and Rents Act became law on the 30th August, 1954. Its main purpose may be conveniently described in two parts. The first part relates to the conditions attaching to grants for works of improvement or conversions necessary to extend the habitability of older decaying houses for a further limited period. The second is slum-clearance. With regard to the former, attention is directed to the nation's stock of existing houses, more than four million of which are over 65 years old. As time passes an increasing number of these older houses fall into decay each year. And here it is fair to say that the Act was designed primarily, not in the interest of owners or of tenants but in the interest of the houses themselves, which represent an important national asset. The second part sets in motion once again the machinery of slum clearance by local authorities. It applies to those areas within their districts where houses have deteriorated to such a degree of decay that they appear to the local Council to be unfit for human habitation and liable to demolition.

To encourage the preservation and retention of decaying houses provisions for Improvement Grants are continued. The grants

themselves are not obligatory but permissive and are solely within the discretion of the Council. It may be of interest to recall that in origin they may be traced as far back as the Housing (Rural Workers) Act 1926-42. In view of the controversy to which they have given rise, it may be worth noting that in the early days of that Act, some Rural District Councils were reluctant to implement its provisions, but that the Rural District Councils as a whole asked for its provisions to be renewed when the Act expired in 1948. Instead however, the 1949 Housing Act went further. Not only did it renew the provisions concerning Improvement Grants, but it extended their use to all authorities. In many important respects the 1949 Housing Act was amended by the recent 1954 Housing Repairs and Rents Act. The new Act simplifies administrative procedure; it removes altogether the upper limit of estimated cost of works, previously £800; it reduces from 30 to 15 years the period for which a dwelling must, after conversion or improvement, be expected to provide satisfactory accommodation, in order to qualify for grant. And finally it amends the provisions for the fixing of rents so as to enable the Council to settle a figure which represents the value of the dwelling under conditions of the day, and so does justice both to the owner and the tenant.

In conclusion, whilst on the face of it the Act clearly encourages modernization of privately owned structurally sound existing houses, the alternative is clearly implied whereby through continued neglect these decaying houses, unless provided with modern amenities, will rapidly deteriorate into slums and put heavier burdens on public funds.

SECTION VIII

Sewerage and Sewage Disposal

Two Sewage Disposal Works serve the district, viz. the Holtspur Bottom Works, which is nearly 34 acres in extent, and the Hedgerley Lane Works of about 26 acres.

At the former, owing to the considerable increase in daily flow, the Council has acquired additional land of about $1\frac{1}{2}$ acres as a safety measure against flooding during periods of exceptional rain. At both, work of a routine maintenance nature has been undertaken and the disposal of sewage has been adequately and safely carried out.

As will be seen from the adjoining table, there are a considerable number of Cesspools within the district that require emptying

CESSPOOLS

Number of Cesspool emptyings in district	...	634
Loads Disposed of in district	... ... ...	1,590

SECTION IX

SANITARY CIRCUMSTANCES OF THE AREA

1. Water Supply

The Council is not a Statutory Water Undertaking, but two such Undertakings serve the district, viz : The Amersham and Beaconsfield Water Company which was recently taken over by the Rickmansworth and Uxbridge Valley Water Company, and the Marlow Water Company : the former serves the main body of the town and the latter Holtspur and District.

There is a piped water supply serving the whole of the district : there are no drinking water wells in use. Several samples have been taken during the year for bacteriological and chemical analysis. Throughout the whole of the area the supply has been satisfactory in both quality and quantity ; it is not liable to have plumbosolvent action.

Water taken from :	Probable No. of coliform bacilli per 100 ml.	Result
Station Road	Nil	Highly satisfactory
Penn Road	Nil	" "
Holtspur	Nil	" "
London Road	Nil	" "

2. Refuse Disposal and Salvage

The use of the Hedgerley Lane site as a refuse tip has been discontinued and the new tip at Hare Hatch Lane is now in operation.

Refuse Bins emptied in district	155,164
Loads to shoot	1,408

The Salvage returns for the year 1954 are as follows : —

		Weight				Value		
		Tons	Cwts.	Qrs.	Lbs.	£	s.	d.
1. Waste Paper		175	3	1	0	1,214	2	10
2. Scrap and Lead		8	0	0	0	34	0	0
3. Rags etc.		—	7	1	0	23	17	6
		183	10	2	0	£1,272	0	4

3. Abatement of Nuisances

The following are the defects dealt with by means of informal action during 1954 : Septic Tank, defective (1) : Cesspool, defective (1) : Blocked drains (4) : W.C., pan broken (1) ; water seal ineffective (1) : Roof, defective tiling (2) : Broken floor boards

(3) : Rain water drainpipe defective (1) : Chimney; flashings defective (1); broken fillett (1) : Walls; defective rendering (1) : Nuisances arising out of smoke and smell (8) : Dust bins (5).

There were no outstanding Informal Notices at 31/12/53 : once again, authority for the service of a Statutory Notice was granted in one case, the work was undertaken before the expiration of the time permitted.

4. Verminous Premises

During the year, 3 verminous premises were dealt with, including the disinfection of 7 rooms, involving 15 inspections. Treatment with D.D.T. and pyrethrum powders proved effective in each case. In two instances the infestation was so severe that temporary removal elsewhere of the inhabitants who were elderly but not so gravely ill as to require hospital treatment, was necessary before the work could be undertaken.

5. Sanitary Inspector's Visits

1.	No. of houses inspected under the Public Health Acts ...	26
2.	No. of houses revisited under the Public Health Acts ...	52
3.	No. of houses inspected under the Housing Acts ...	7
4.	No. of houses re-inspected under the Housing Acts ...	6
5.	No. of houses inspected for vermin	5
6.	No. of rooms disinfected	6
7.	Smoke observations	10
8.	Visits in connection with drainage	12
9.	Visits in connection with water supply	8
10.	Visits to shops	8
11.	Visits in connection with infectious disease	14
12.	Visits in connection with factories	6
13.	Visits in connection with Public Health samples	12
14.	Visits in connection with defective dustbins	24
15.	Miscellaneous	19

6. Pet Animals Act, 1951

There has been no application for permission to keep a pet shop in the Council's district.

7. Rag, Flock and Other Filling Materials Act, 1951

There is one premises registered under the Act, the activities carried on being the manufacture of soft toys and upholsterv

8. Housing

1. Inspections of Dwelling-houses during the year : —
 - (a) Total number of dwelling-houses inspected for having defects (Under Public Health or Housing Acts) ... 22
 - (b) Number of Inspections made for the purpose ... 35
 - (c) Number of dwelling-houses found to be so dangerous as to be unfit, or injurious to health ... 2
 - (d) Number of dwelling-houses found not to be in all respects fit for human habitation ... 3
2. Remedy of defects during the year without the service of a formal notice : —
 - (a) Number of infective dwelling-houses rendered fit in consequence of *informal* action by local Authority or their Officers ... 6
3. Action under Statutory Powers during the year. Proceedings under Section 9, 10 and 16 of the Housing Act 1936 :
 - (a) Number of dwelling-houses in respect of which Notices were served requiring repairs ... 1
 - (b) Number of dwelling-houses which were rendered fit after service of formal notices ... 1

RODENT CONTROL

9. Prevention of Damage by Pests, 1949

The Council employs one part-time Rodent Operative who works under the supervision of the Rodent Officer.

The Prevention of Damage by Pests Act came into force on the 31st March, 1950. It requires the Council to submit an Annual Return to the Ministry of Agriculture and Fisheries. The following figures are taken from Form PDR/2 submitted for the 15-month period ending 31st March, 1955 : —

- (a) Type and Estimated Total number of Premises :

1. Local Authority	...	...	...	...	...	...	...	8
2. Dwelling Houses	...	...	...	...	...	...	...	2,520
3. Agricultural Property	...	...	...	...	...	...	...	17
4. Business and Industrial Premises	...	...	...	...	...	...	...	170
								2,698
- (b) Classification of Infestations :

1. Major	...	...	...	...	...	...	...	4
2. Minor	...	...	...	...	...	...	...	104
3. Mice Only	...	...	...	...	...	...	...	2
- (c) Notices Served :

1. Under Section 4 (Treatment)	...	...	...	...	...	...	...	2
2. Structural Works (Proofing)	...	...	...	...	...	...	...	3
Block Control Schemes carried out	...	...	...	...	...	...	...	3

10. Inspection and Supervision of Food

During the fourteen year period of meat control there was no central abattoir situated within the Council's district, the nearest were at Gerrards Cross, High Wycombe, Chesham and Slough. These acted also as meat distribution centres for their respective areas and this district was served by Slough. The various matters relating to slaughter houses such as slaughtermen's licences and the regulations regarding the disposal of condemned foodstuffs, do not arise. Food unfit for human consumption is surrendered either by members of the public direct or by the butchers themselves. There are five butcher's shops in Beaconsfield, and they are visited periodically. The amount of condemned foodstuff is small, and during the past year it was as follows :—

CONDEMNED FOODSTUFF.

Lamb	1 cwt. 0 qrs. 14 lbs. 14 oz.
Fish (Kippers)	14 lbs.
Raisins (Seedless)	44 lbs.
Evaporated Milk	7 Tins
Peas (Tinned)	1 Tin
Buttered Beans (Tinned)	1 Tin
Apricots (Tinned)	1 Tin
Tomatoes (Tinned)	1 Tin

Condemned foodstuff is collected from traders, and is disposed of by incineration. Normally, at slaughterhouses since 1953 all meat and offal unfit for human consumption was removed by contractors approved by the Ministry of Food. The material was used in the manufacture of tallow, greases, animal Feeding Meals and fertilizers, being sterilized in the process of manufacture. As from 1st August 1953, revised arrangements came into operation, whereby condemned materials from controlled slaughter-houses were offered for sale by public auction at regular intervals. More recently, in December, 1953, revised conditions of sale, incorporated clauses with a direct bearing on prevention of danger to public health. By the provisions of Livestock (Restriction on Slaughtering) Order 1947 all condemned meat and offal is stained green, before delivery to buyers.

11. Slaughter Houses

When meat was decontrolled the Council was charged with the responsibility for ensuring that slaughtering facilities in their area would be adequate on and after the date of decontrol, viz the 2nd July 1954. The central abattoir of the Control Commission which also served as a distribution centre, was situated at Slough, and its use as such ceased on decontrol. Upon decontrol, however, it was ascertained that the facilities for the Council's area were adequate, and no licences for private slaughter houses have been granted by the Council since 2nd July 1954.

12. Food Poisoning

There was no confirmed case of food poisoning within the District during the year.

13. Milk

As the responsibility for designated milk in this urban district rests with the County Council, that Council will also be the authority for the enforcement of the conditions of the Milk (Special Designations) (Specified Areas) (No. 2) Order, 1953.

The following licences were issued :

Special Designation "Tuberculin Tested"	2
Supplementary licence authorising use of special designation "Tuberculin Tested"	1
Special Designation "Pasteurised"	1
Special Designation "T.T. Pasteurised"	2
Special Designation "Sterilized"	1

14. Specified Area

Since the 3rd December 1953 the Beaconsfield Urban District is included as an area within an Order made by the Minister of Food. Since then it has been illegal to sell raw undesignated milk within the Council's District.

15. Ice Cream

In connection with the Ice-Cream (Heat Treatment, etc.) Regulations, 1947, frequent visits have been made to premises where ice-cream is sold.

There are no premises registered where ice-cream is manufactured, but there are 14 registered for the sale and storage of ice-cream. Twelve samples of ice-cream were submitted for bacteriological examination; of these 2 were in Grade IV; 5 in Grade III; 6 in Grade II, and 4 in Grade I of the Provisional Grading Scheme.

G. FACTORIES ACT, 1937

Part I of the Act

1.—*Inspections* for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	5	6	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	22	10	—	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ...	—	—	—	—
TOTAL	27	16	Nil	Nil

2.—Cases in which *Defects* were found.

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Inspector	Referred By H.M. Inspector	
Want of cleanliness (S.1)					
Overcrowding (S.2)					
Unreasonable temperature (S.3)					
Inadequate ventilation (S.4)					
Ineffective drainage of floors (S.6)					
Sanitary Conveniences (S.7):					
(a) Insufficient					
(b) Unsuitable or defective	3			3	
(c) Not separate for sexes					
Other offences against the Act (not including offences relating to Outwork)					
TOTAL	3	Nil	Nil	3	Nil

3.—*Outwork.*

We have two notified outworkers in the district.

APPENDIX I

BOROUGH OF SOUTHWARK

Public Analyst's Department,
Heath Services Department,
Walworth Road, S.E.17.

D.F.H. Button, A.R.C.S., F.R.I.C.
Public Analyst.

Report on the Analysis of a sample of water received from the Beaconsfield Urban District Council, Beaconsfield, Bucks.

Sample of water supplied by the Marlow and District
Water Company.

Appearance	Clear and Colourless
Reaction (pH)	7.1
	Parts per Million
Free Chlorine	nil
Total Solids	326
Chlorine in Chlorides	13.0
Ammoniacal Nitrogen	nil
Albuminoid Nitrogen	0.010
Nitrate Nitrogen	4.0
Nitrite Nitrogen	nil
Oxygen absorbed from permanganate (3 hrs. at 98°F.)	0.20
Hardness, Temporary	245
Permanent	26
Total	271
Metals—Lead, Copper, Zinc	Not found

From these results I am of opinion that this water is chemically of high purity and suitable for drinking and domestic use.

(Signed) D. F. H. BUTTON,
Public Analyst.

APPENDIX II

BOROUGH OF SOUTHWARK

Public Analyst's Department,
Health Services Department,
Walworth Road, S.E.17.

D.F.H. Button, A.R.C.S., F.R.I.C.
Public Analyst.

Report on the Analysis of a sample of water received from the Beaconsfield Urban District Council, Beaconsfield, Bucks.

Sample of water supplied by the Rickmansworth &
Uxbridge Valley Water Company.

Appearance	Clear and Colourless
Reaction (pH)	7.3
	Parts per Million
Free Chlorine	nil
Total Solids	346
Chlorine in Chlorides	13.0
Ammoniacal Nitrogen	0.015
Albuminoid Nitrogen	0.013
Nitrate Nitrogen	1.6
Nitrite Nitrogen	nil
Oxygen absorbed from permanganate (3 hrs. at 98° F.)	0.16
Hardness, Temporary	255
Permanent	30
Total	286
Metals—Lead, Copper, Zinc	Not found

From these results I am of opinion that this water is chemically of high purity and suitable for drinking and domestic use.

(Signed) D. F. H. BUTTON,
Public Analyst.

